Public Health
Seattle & King County

An emergency texting program for employees

Hilary Karasz, PhD

BACKGROUND SMS INITIATIVE AT PUBLIC HEALTH

- 5-year CDC funded grant to study mobile for emergency communications
- Focus on logistics, costs, legal, audiences
  - Audiences – general King County population (adult texters); limited English proficiency, rural; Deaf & Hard of Hearing, PH employees

EMPLOYEE TEXTING PROGRAM

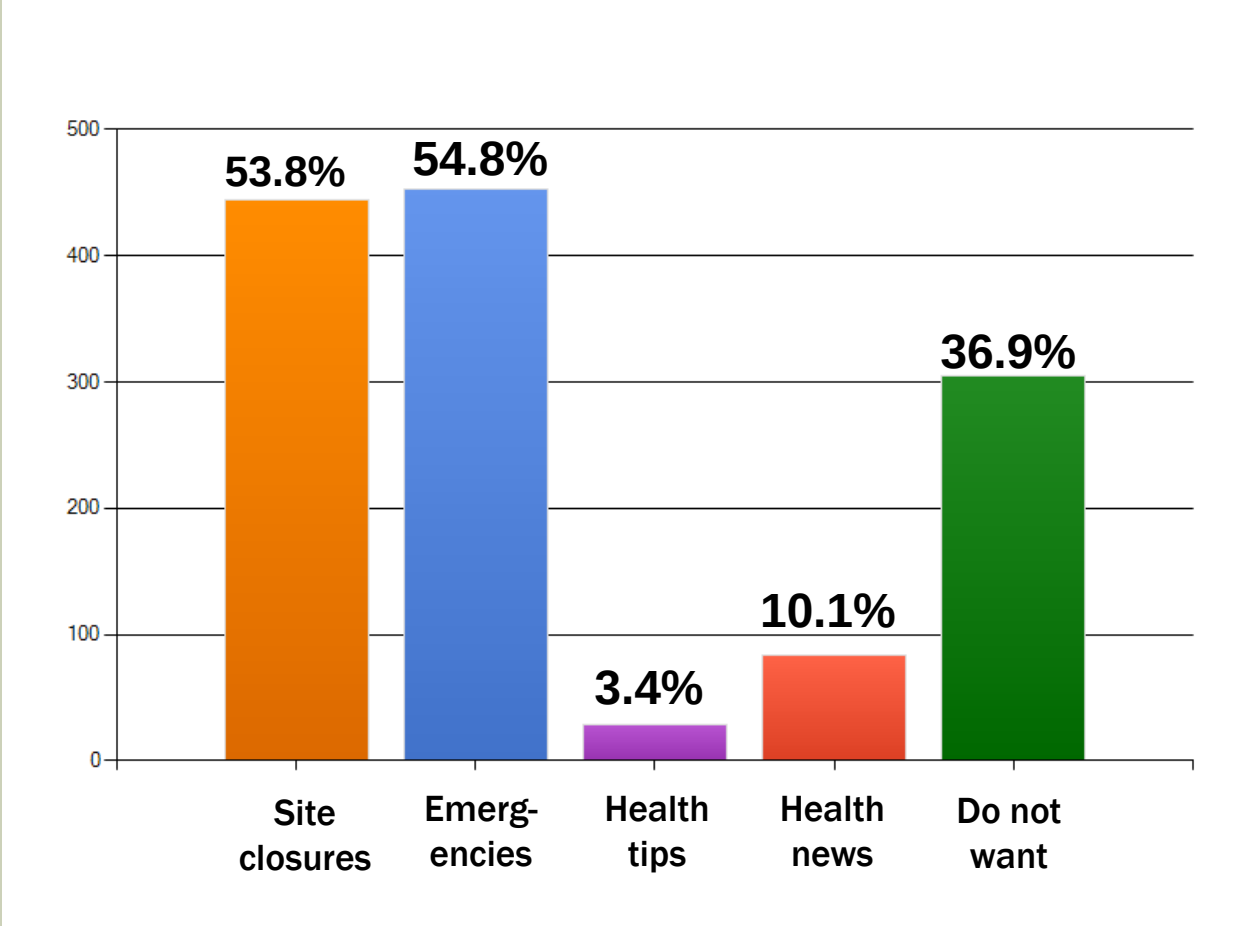
Goal: Offer an emergency texting program to all public health employees that is …

- useful
- acceptable to employees
- easy to enroll and opt-out,
- voluntary
- easy to manage
- at a reasonable cost to the department

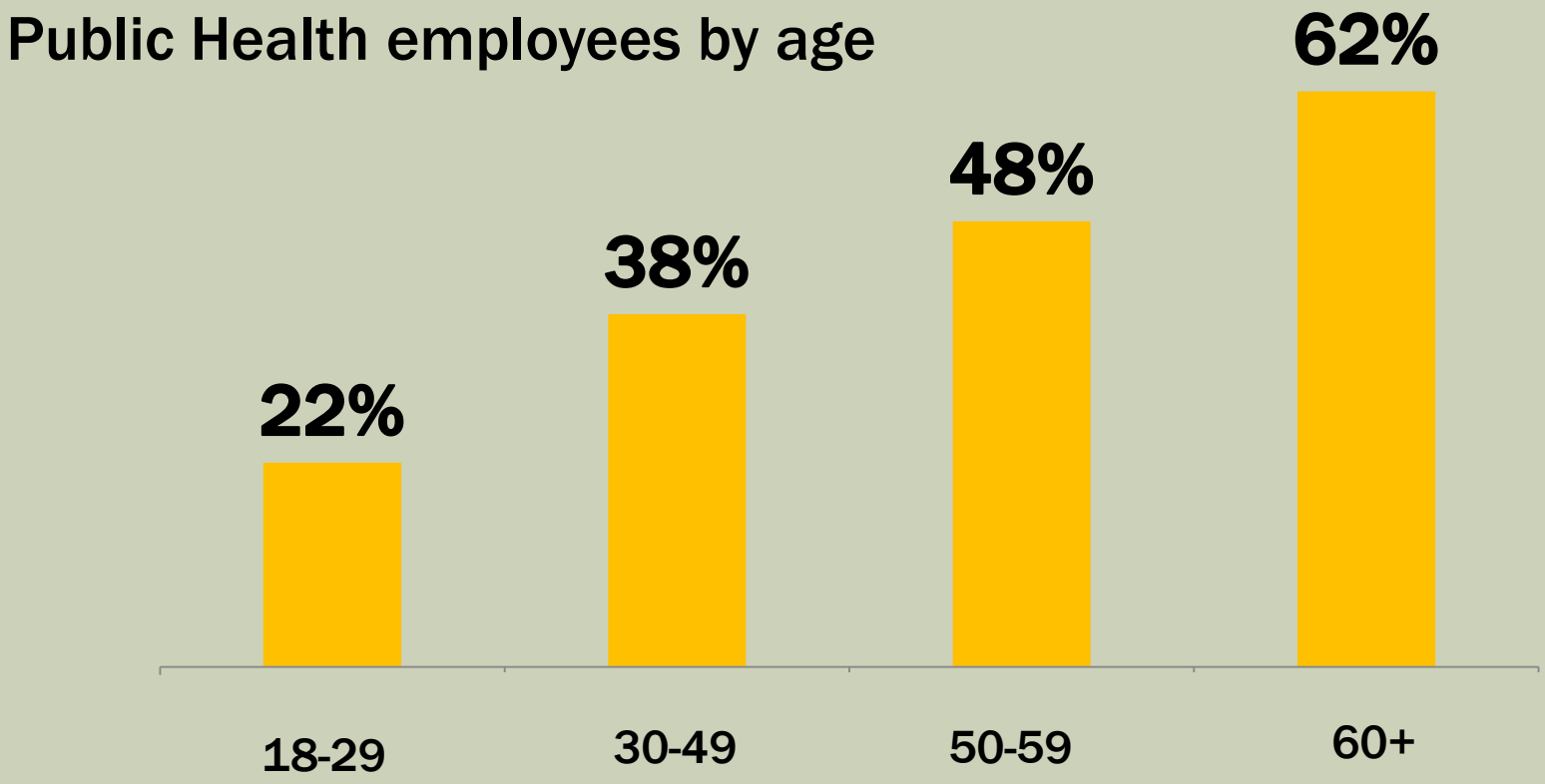
STEP 1: AUDIENCE RESEARCH

- met with administration, IT, unions
- interviewed key informants across the department
- developed and administered survey
  - asked about barriers & benefits

TOPICS OF INTEREST



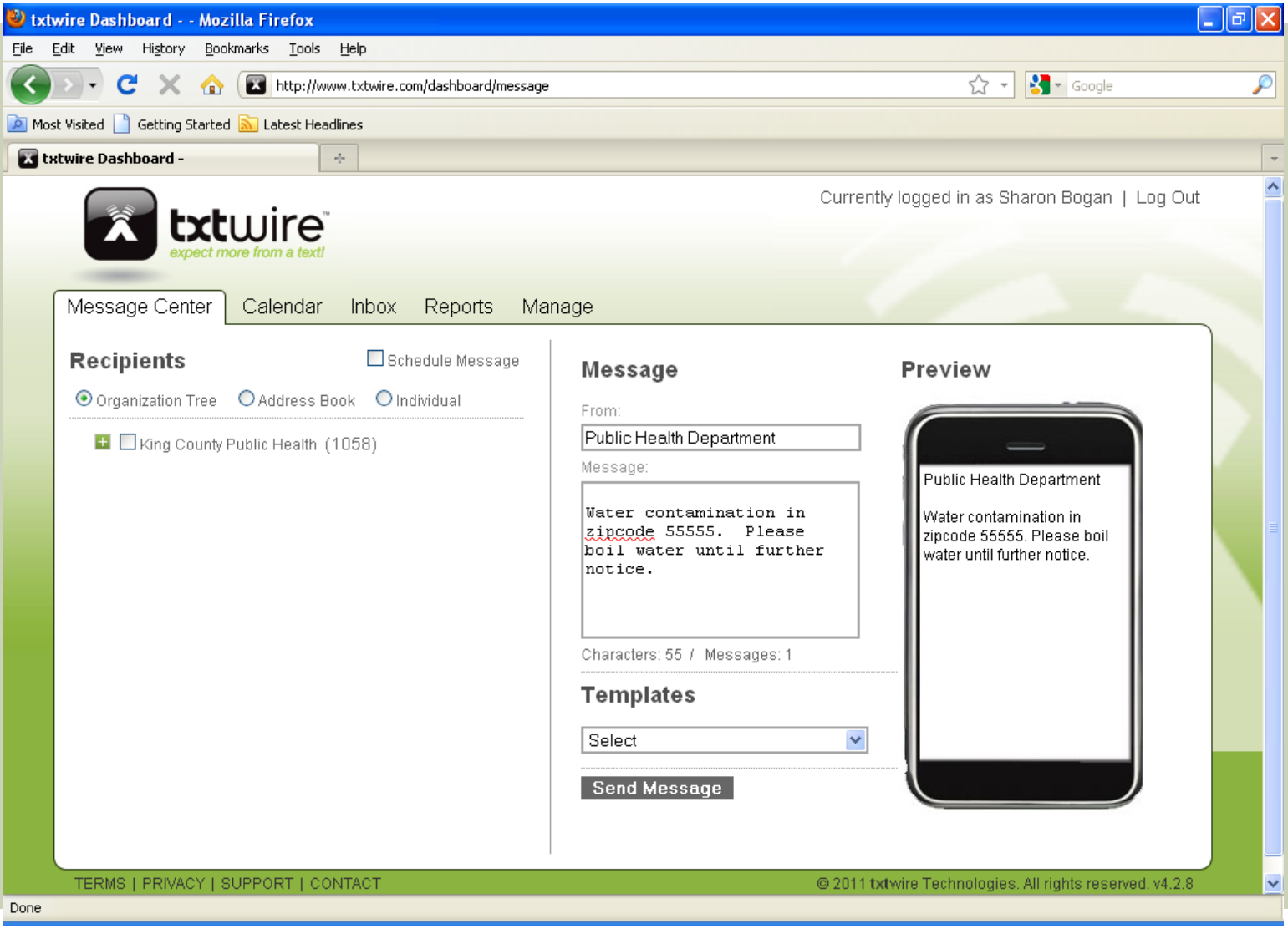
WHO IS UNLIKELY TO SIGN UP?



COMMENTS

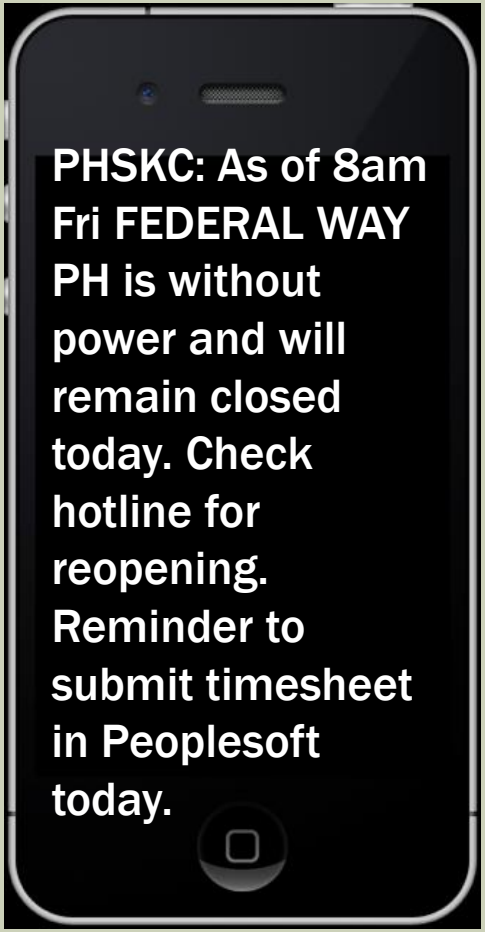
- This is a great idea, and something that would likely work well especially when phone lines are busy.
- Keep it simple. Critical emergency and work site closure information only.
- I don't want to be notified about work issues on my off time. PERIOD.
- It seems like a bad idea and a huge waste of King County $ and resources.

STEP 2. BUILT & MARKETED THE PROGRAM

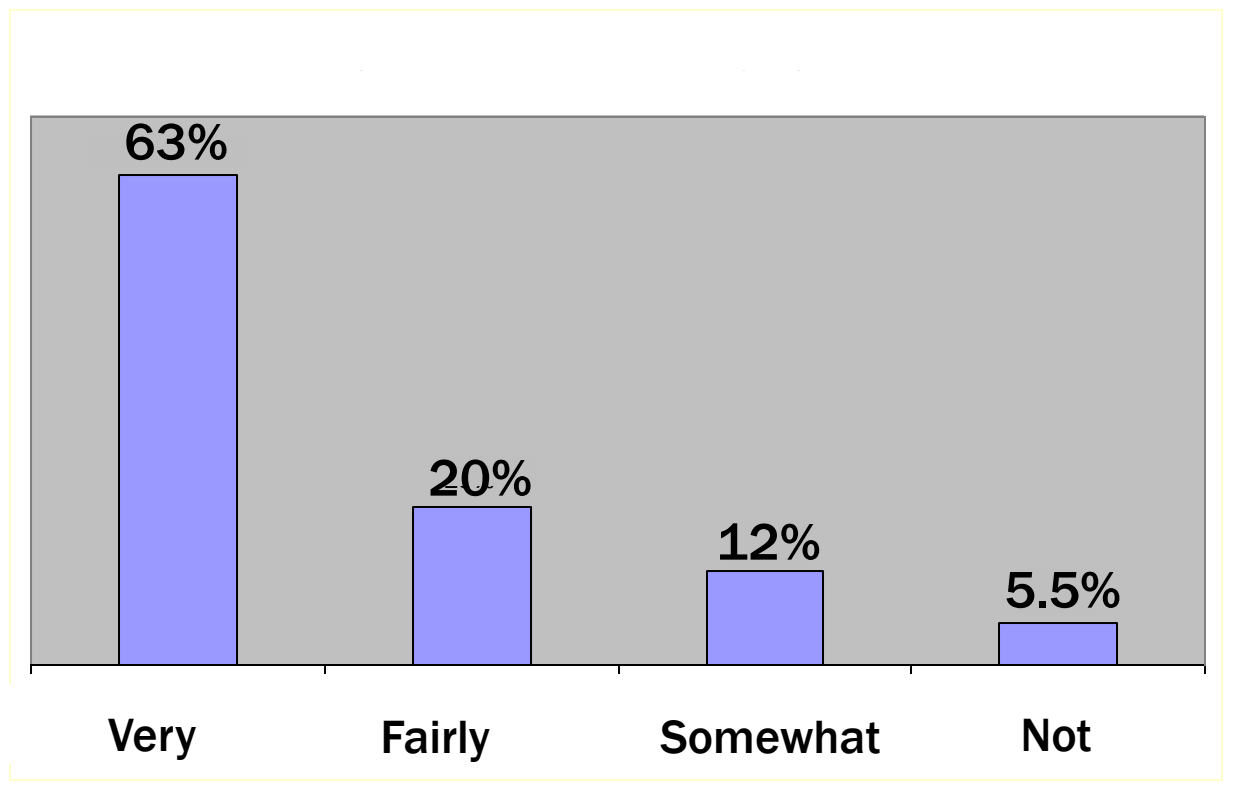


STEP 3. IMPLEMENTATION SNOWMAGEDDON 2012

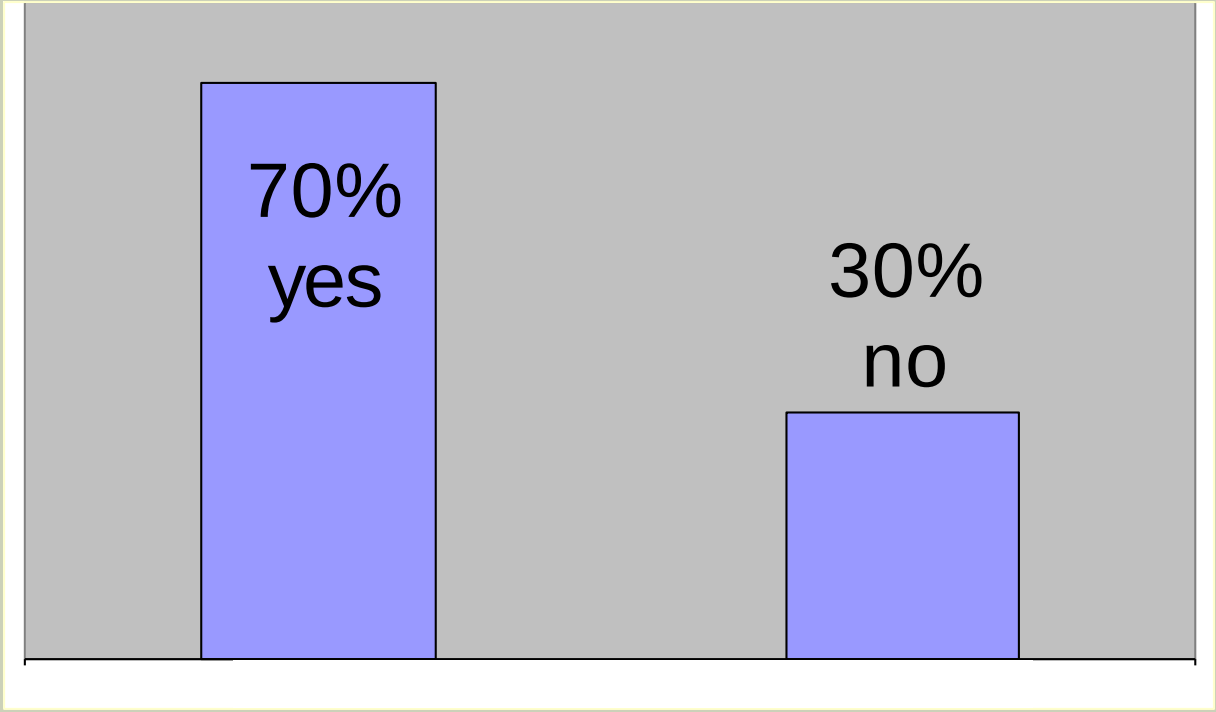
We sent 15 text messages over 5 days of the snow and ice storm.



WERE THE TEXT MESSAGES RELEVANT AND HELPFUL?



On at least one occasion, did you receive a text message alert before you heard about the information another way (e.g. website, email message or employee hotline)?



LESSONS LEARNED

- know that text messaging is useful for emergencies
- understand your audience
- deliver what you promise
- control expectations
- test and train
- try to partner - vendor costs/service vary

FOR MORE INFORMATION OR TO CONTACT US ABOUT OUR TEXT MESSAGING PROJECT:

Hilary.karasz@kingcounty.gov;
sharon.bogan@kingcounty.gov
www.kingcounty.gov/health/texting

This work was partially supported by the Centers for Disease Control and Prevention, Grant no 5PO1TP000297. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention.

Public Health
Seattle & King County